

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION

COVER PAGE

MAR 16 2015

Please type or print in ink.

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Parks

2015 APR -9 PM 2:08  
Sherryl

L.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Del Mar

Division, Board, Department, District, if applicable

Your Position

Deputy Mayor

CCouncil, Metro Commission, SANDIST, CSA-17 Board

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☒ City of Del Mar, California

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2014, through December 31, 2014.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2014.

☐ The period covered is January 1, 2014, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5.

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed

March 16, 2015  
(month, day, year)

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

▶ **NAME OF BUSINESS ENTITY**Johnson & Johnson**GENERAL DESCRIPTION OF THIS BUSINESS**Health Care Sector Company**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

**NATURE OF INVESTMENT**

- ☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
 ACQUIRED      DISPOSED

▶ **NAME OF BUSINESS ENTITY****GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

**NATURE OF INVESTMENT**

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
 ACQUIRED      DISPOSED

▶ **NAME OF BUSINESS ENTITY****GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

**NATURE OF INVESTMENT**

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
 ACQUIRED      DISPOSED

▶ **NAME OF BUSINESS ENTITY**Berkshire Hathaway**GENERAL DESCRIPTION OF THIS BUSINESS**Diversified Company**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

**NATURE OF INVESTMENT**

- ☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
 ACQUIRED      DISPOSED

▶ **NAME OF BUSINESS ENTITY****GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

**NATURE OF INVESTMENT**

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
 ACQUIRED      DISPOSED

▶ **NAME OF BUSINESS ENTITY****GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

**NATURE OF INVESTMENT**

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

Name \_\_\_\_\_

# **SCHEDULE D** **Income – Gifts**

► NAME OF SOURCE (Not an Acronym)

San Diego County Fair

ADDRESS (Business Address Acceptable)

2260 Jimmy Durante Blvd  
BUSINESS ACTIVITY, IF ANY, OF SOURCE DM, CA

June 2014 \$150 Dinner/Concert  
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

   /   /    \$ 25ea Dinner

   /   /    \$ 50ea Concert

   /   /    \$ 150ea Total

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

   /   /    \$ \_\_\_\_\_

Comments: \_\_\_\_\_